

01/10/02
JCG04 U.S. PTO

(Rev.85-11/00 Pub.605)

FORM 17-1.1

17-11

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PTO/SB/50 (08-00)

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U S Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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10/10/02
JCG04 U.S. PTO

REISSUE PATENT APPLICATION TRANSMITTAL

Address to: Assistant Commissioner for Patents Box Reissue Washington, DC 20231	Attorney Docket No.	569-P-001
	First Named Inventor	P. Chase
	Original Patent Number	6,220,555
	Original Patent Issue Date (Month/Day/Year)	April 24, 2001
	Express Mail Label No.	

APPLICATION FOR REISSUE OF: Utility Patent Design Patent Plant Patent
(Check applicable box)

APPLICATION ELEMENTS (37 CFR 1.173)		ACCOMPANYING APPLICATION PARTS
1. <input checked="" type="checkbox"/> Fee Transmittal Form (PTO/SB/56) (Submit an original, and a duplicate for fee processing)	7. <input checked="" type="checkbox"/> Statement of status/support for all changes to the claims. See 37 CFR 1.173 (c)	
2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	8. <input checked="" type="checkbox"/> Original U S Patent for surrender <input checked="" type="checkbox"/> Ribboned Original Patent Grant <input type="checkbox"/> Statement of Loss (PTO/SB/55)	
3. <input checked="" type="checkbox"/> Specification and Claims in double column copy of patent format (amended, if appropriate)	9. <input type="checkbox"/> Foreign Priority Claim (35 U S C 119) (if applicable)	
4. <input checked="" type="checkbox"/> Drawing(s) (proposed amendments, if appropriate)	10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations	
5. <input checked="" type="checkbox"/> Reissue Oath/Declaration (original or copy) (37 C.F.R. § 1.175) (PTO/SB/51 or 52)	11. <input type="checkbox"/> English Translation of Reissue Oath/Declaration (if applicable)	
6. Original U S Patent currently assigned? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, check applicable box(es))	12. <input checked="" type="checkbox"/> Preliminary Amendment	
<input type="checkbox"/> Written Consent of all Assignees (PTO/SB/53)	13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
<input type="checkbox"/> 37 C F R. § 3.73(b) Statement <input type="checkbox"/> Power of Attorney (PTO/SB/96)	14. Other	

15. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label (Insert Customer No. and Bar Code Label here)		<input type="checkbox"/> Correspondence address below
Name	07277	
Address	PATENT TRADEMARK OFFICE	
City	State	Zip Code
Country	Telephone	Fax

NAME (Print/Type)	Howard C. Miskin	Registration No. (Attorney/Agent)	18, 999
Signature	Howard C. Miskin	Date	10/23/01

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REISSUE APPLICATION FEE TRANSMITTAL FORM				Docket Number (Optional) 569-P-001				
Claims as Filed - Part 1								
Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	Rate	Fee	
(A) 8	Total Claims (37 CFR 1.16(j))	(B) 8	**** =	x \$ _____ =		or	x \$ _____ =	
(C) 3	Independent claims (37 CFR 1.16(i))	(D) 3	* =	x \$ _____ =	\$ 370		x \$ _____ =	
				Basic Fee (37 CFR 1.16(h))		\$ 370		
				Total Filing Fee		\$ 370		
Claims as Amended - Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	*** 16	MINUS	** 20	* = 0	x \$ _____ = 0		x \$ _____ =	
Independent Claims (37 CFR 1.16(i))	*** 3	MINUS	**** 3	= 0	x \$ _____ =		x \$ _____ =	
				Total Additional Fee		\$ 0		
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space</p> <p>*** After any cancellation of claims</p> <p>**** If "A" is greater than 20, use (B - A), if "A" is 20 or less, use (B - 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C)</p>								
<p><input checked="" type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27</p> <p><input type="checkbox"/> Please charge Deposit Account No _____ in the amount of _____ A duplicate copy of this sheet is enclosed</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No <u>13-3731</u> A duplicate copy of this sheet is enclosed</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ <u>370.00</u> to cover the filing / additional fee is enclosed</p> <p><input type="checkbox"/> Payment by credit card Form PTO-2038 is attached</p>								
<p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038</p>								
<u>October 23, 2001</u> Date				 Signature of Applicant, Attorney or Agent of Record				
<u>Howard C. Miskin</u> Typed or printed name								

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**TRANSMITTAL LETTER
(General - Patent Issued)**

Docket No.
569-P-001

Patentee(s): Philip Cru Chase

U.S. Patent No.
6,220,555

Issue Date
April 24, 2001

Title: DISPLAY DEVICE

TO THE COMMISSIONER OF PATENTS AND TRADEMARKS:

Transmitted herewith is:

Reissue Patent Application Transmittal & Reissue Application Fee Transmittal Form (in duplicate)
Specification & Claims in double column copy of patent format, Request of Transfer of drawings from patent
Reissue App. Declaration by Inventor, Consent of Assignee, Status of Claims & Support for Claim Changes
Original U.S. Patent, Information Disclosure Statement, Preliminary Amendment & Certificate of Mailing
Confirmation Postcard & 22 Cited references.

- No additional fee is required.
 A check in the amount of \$370.00 is attached.
 The Commissioner is hereby authorized to charge and credit Deposit Account No. 13-3731
as described below. A duplicate copy of this sheet is enclosed.
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but we got a check of \$230.00

Howard C. Miskin
Signature

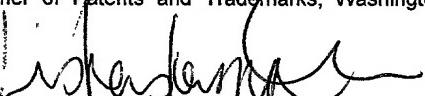
Dated: October 23, 2001

HOWARD C. MISKIN, ESQ.

Reg. No.: 18,999

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D.C. 20231


Signature of Person Mailing Correspondence

Kishasha M. Duncan

Typed or Printed Name of Person Mailing Correspondence

CC:

CERTIFICATE OF MAILING BY FIRST CLASS MAIL (37 CFR 1.8)

Applicant(s): Philip Cru Chase

Docket No.

569-P-001

Serial No.
09/166,240Filing Date
October 5, 1998

Examiner

Group Art Unit

Invention: DISPLAY DEVICE

I hereby certify that this **REISSUE PATENT APPLICATION AND ENCLOSURES**
(Identify type of correspondence)

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Practitioner's Docket No. 569-P-001

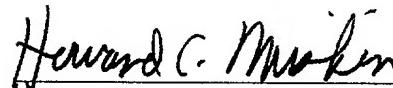
PATENT

**REQUEST FOR TRANSFER OF DRAWINGS FROM ORIGINAL PATENT
TO REISSUE APPLICATION**

Please transfer the drawings from original patent, U.S. Patent No. 6,220,555, filed on October 5, 1998, for the invention entitled Display Device

to the reissue application, the specification of which:

- is attached hereto.
 was filed on _____, as reissue application number /



Signature of practitioner

Date: October 23, 2001

HOWARD C. MISKIN, Esq.

(type or print name of practitioner)

Reg. No.: 18, 999

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